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Page 1 of 37

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Facsimile: 832-813-1804

Time Sent: 3:28 PM

Date: October 24, 2005

Re:

In re Application of:

Hu Yang, et. al.

Serial No.:

09/666,642

Filed:

Sept. 21, 2000

For:

Compatible Blend Systems of Oxygen

Barrier Polymers and Oxygen

Scavenging Polymers

Group Art Unit: 1711

Examiner: Jeffrey C. Mullis

Atty. Docket: 09/575094US2

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Please call Kim Gregg at 832-813-4642 if all pages are not received.

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P.02/37

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Effectiv	Complete if Known				1		
Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818).			Application Number 09/6		9/666,642		EIVED
FEE TRANSMITTAL For FY 2005			Filing Date	s	September 21, 2000	CENTRAL	FAX CENTER
			First Named Inve	entar	lu Yang, et al.		
			Examiner Name	J	effrey C. Mullis	001	2 4 2005
Applicant claims small entity status. See 37 CFR 1.27			Art Unit	1	711		1
TOTAL AMOUNT OF PAYMENT (\$) 130.00			Attorney Docket	Attorney Docket No. 09/575094US02			<u>'</u>
METHOD OF PAYMENT	(check all	hat apply)					l
Check Credit Card Money Order None Other (please identify):							
Deposit Account Deposit Account Number: 50-1629 Deposit Account Name: Chevron Phillips Chemical Company, LP							
For the above-identified deposit account, the Director is hereby authorized to: (check all that apply)							Ì
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FEE CALCULATION							1
BASIC FILING, SEARCH, AND EXAMINATION FEES FILING FEES SEARCH FEES EXAMINATION FEES							
;	Si	nall Entity	Small Entity		Small Entity	Fees Paid (\$)	1
Application Type	Fee (\$)	Fee (\$) Fee		Fee (rees raid (a)	ļ
Utility	300	150 500		200			1
Design	200	100 100		130			1
Plant	200	100 300		160	- '		ŀ
Reissue :	300	150 500	-	600			
Provisional	200	100	0	0	=	all Entity	1
2. EXCESS CLAIM FEE Fee Description	ES					Fee (\$)	
Each claim over 20 (including Reissues) 50 25							
Each independent claim over 3 (including Reissues) 200 100							
Multiple dependent o	ee Paid (\$)		Multiple Depar				
- 20 or HP =	Extra Clain	_ ×= _			Fee (\$)	Fee Paid (\$)]
HP = highest number of total	daims paid fo	r, if greater than 20.	ee Paid (\$)				İ
Indep. Claims - 3 or HP =	Extra Clain	<u>15 </u>	ee Fald (4)				
HP = highest number of inde	pendent daims	paid for, if greater than 3.					İ
3. APPLICATION SIZE If the specification and	l drawinge e	xceed 100 sheets of	paper (excluding o	electron	ically filed sequence	or computer	1
listings under 37 C	FR 1.52(e))	the application size	fee duc is \$250 (\$	125 101	small entity) for each	ch additional 50	1.
sheets or fraction th	hercof. See	35 U.S.C. 41(a)(1)(0	3) and 37 CFR 1.1	l6(s).		Fee Paid (\$)	1
<u>Total Sheets</u> - 100 =	Extra Shee	/50 =	(round up to a	whole nu	mber) x	_ =	ŀ
4. OTHER FEE(S) Non-English Specification, \$130 fee (no small entity discount)							
Other (e.g., late filing surcharge): Terminal Disclaimer							
SUBMITTED BY	10		Registration No.	45.055	Telephone a	32-813-4339	
Signature	Pool	aut god	(Altorney/Agent)	45,036	- 175	71111	=
Name (Print/Type) K. KaRar	Reed	٠)			Date (C	7/24/02	<i>.</i>

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